

Latch Key Provider Form

According to IC 20-26-5-2 your school corporation is required to offer a school-age child care program. A school may contract with a not-for-profit or for-profit organization to conduct its programs. However, the legislation requires for the programs to be utilized at school facilities.

SECTION I:	
Corporation Name	_ Corp #
County/ Township	
□ No, we are not offering a Latch Key program. Waiver form attached.	
☐ Yes we will be offering a Latch Key program at our School/Organization	
If you checked YES, please fill out Section II of this form on pages 2 and 3.	
Did you facilitate a parent survey?	
□ Yes, results are attached	
□ No	

SECTION II:

Indiana Department of Education is partnering with the Indiana Afterschool Network to track comprehensive school-age childcare (i.e. afterschool and summer learning programs) statewide in order to:

- ☼ Identify the need for afterschool and summer programs and gaps in available services to influence statewide planning
- ☼ Build/expand the searchable database and map of program locations and activities for schools, parents, and community organizations

The following information will be entered into the Indiana Afterschool Network Database, with a link on the DOE website: www.indianaafterschool.org

AFTERSCHOOL PROVIDER INFORMATION (If you have more than one provider, you may complete pages 2 and 3 of this form for the most comprehensive program, or complete one for each provider)

Organization Name (or School Name, if you are the program provider):								
Primary Contact Person for the Aftersch		Last Name):						
Address:								
City, State, Zip:								
Website:								
Phone:	Fax:							
Number of years in operation:								
Afterschool Program Description:								
								
Where is the program located?								
□School □Community-Based Org □Other	□Faith-Based Org							
Average # children/youth served daily	- 54 400	_ 101						
□ 1-20 □ 21-50	□ 51-100	□ 101+						

What is the grade level of your participants? (check all that apply)										
			□2 nd	□3 rd	$\Box 4^{th}$	□5 th	$\Box 6^{th}$			
			□ 10 th	□ 11 th	□12 th		_0			
□ /					□1∠					
Program Calendar (check all the Before School ☐ Weekends ☐ Summer			nat apply) After So School I Other		cations					
□ Tutoring □ Academ □ Science □ Visual & □ Cultural □ Charact □ Civic Eng □ Sports & □ Health & □ Mentori □ College □ Career/s	g & Homevolic Enrichme & Technol Performin Enrichme er Educatio gagement & Recreatio & Wellness ing Readiness Job Explore & Parent A	nent logy ng Arts nt on on								
□ Transpo □ Funding □ Commu □ Staffing □ Training □ Volunte □ Parent I	rtation ity Partne i ers nvolvemer on/Trackir	ers		to expand	ing & deve	eloping yo	ur program?			
Type of Co Rural Urban Suburba	·	(check all	that apply)						
Office of I 151 W. Of	riscoe epartment ntegrated		tion							